

## CERTIFICATE OF ORGANIZATION FILED EFFECTIVE LIMITED LIABILITY COMPANY

(Instructions on back of application)

2013 OCT 17 AM 9: 17

( =====================================	. Duck of application	) 2513 007 17 7	
1. The name of the limited liabili	ty company is:	OCODETADV OF CTATE	
SO PERLA LLC	, , ,	SECRETARY OF STATE STATE OF IDAHO	
2. The complete street and mailin 1143 MIDWAY, AMMON, IDAHO 8	ng addresses of the	initial designated office:	
(Street Address) PO BOX 715, REXBURG, IDAHO (Mailing Address, if different than street add	83440 Iress)		
i. The name and complete street	address of the regis	stered agent:	
KYLE STEVENS	1143 Midwa (Street Address)	ay Ammon ID 83406	
. The name and address of at le company:	ast one member or i	manager of the limited liability	
Name Name		<u>Address</u>	
KYLE STEVENS	PO BOX 715, R	PO BOX 715, REXBURG, IDAHO 83440	
. Mailing address for future corre- 39 PROFESSIONAL PLAZA, REXB	spondence (annual i URG, IDAHO 83440	report notices):	
Future effective date of filing (or	otional):		
gnature of a manager, member	or authorized		
gnature <u>Kylz Stevens</u> ped Name: <u>Kylz Stevens</u>		Secretary of State use only	
gnature		IDAHO SECRETARY OF STATE	
ped Name:		10/17/2013 05:00 CK: 462 CT: 266739 BN: 139425	

19/17/2013 05:00 CK: 462 CT: 266739 BH: 1394257 1 8 100.00 = 100.00 ORGAN LLC \$ 2 1 8 28.00 = 28.00 EXPEDITE C # 1